PTO/SB/22 (12-08)

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 | | Docket Number (Optional) 27373/36638A | | | |
|--|---------------------|---------------------------------------|----------|--|--|
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | | |
| Application Number 09/964,042-Conf. #1056 | | Filed September 26, 2001 | | | |
| For TREATMENT OF TUMORS WITH GENETICALLY ENGINEERED HERPES VIRUS | | | | | |
| Art Unit 1635 | | Examiner | J. E. An | gell | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | |
| One month (37 CFR 1.17(a)(1)) | <u>Fee</u> \$130 | Small Entity Fee \$65 | \$ | | |
| x Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ | 245.00 | |
| Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ | | |
| Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ | THE STATE OF THE S | |
| Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ | | |
| A check in the amount of the fee is enclosed. X Payment by credit card. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). X attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 | | | | | |
| Signature | | February 17, 2009 Date | | | |
| Marshall P. Byrd | | (312) 474-6300 | | | |
| Typed or printed name | | Telephone Number | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | |
| Total of 1 forms are subm | нтеа. | | | | |

| I hereby certify that this paper (along with an system in accordance with § 1.6(a)(4). | y paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing |
|--|--|
| Dated: February 17, 2009 | Signature: (Marshall P. Byrd) |